

**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: FilmLoop, Inc.

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 285 Hamilton Ave, Suite 400, Palo Alto, CA 94301

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Prescott Lee

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):
FilmLoop, Inc., 285 Hamilton Ave, Suite 400, Palo Alto, CA 94301

Telephone Number of Designated Agent: 650-329-9464

Facsimile Number of Designated Agent: 650-329-9444

Email Address of Designated Agent: prescott.lee@corp.filmloop.com

Signature of Officer or Representative of the Designating Service Provider:
[Signature] **Date:** November 16, 2006

Typed or Printed Name and Title: Michael Samols, VP Business Development

**Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee
Made Payable to the Register of Copyrights.**



SCANNED 12 08 - 2006

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